

OCCUPATIONAL THERAPY IN THE CONTEXT OF HEALTH EDUCATION: AN EXPERIENCE REPORT

A TERAPIA OCUPACIONAL NO CONTEXTO DA EDUCAÇÃO EM SAÚDE: UM RELATO DE EXPERIÊNCIA

LA TERAPIA OCUPACIONAL EN EL CONTEXTO DE LA EDUCACIÓN PARA LA SALUD: UN INFORME DE EXPERIENCIA

Nayana dos Santos FLEXA¹
Raissa Brígido Ispala CAMARGO²
Sara Pacheco NOGUEIRA³
Samantha Cristiny Fernandes NUNES⁴

ABSTRACT: Health education is a promising method to cope with adversities that affect the health of the population. This is a report of experience, with descriptive approach, aiming to narrate the experience lived by students of occupational therapy in a municipal health unit – UMS. Apt and able to designate numerous forms of care in an adequate way it was perceived that occupational therapy stands out for having a supportive and enhancing look. It is concluded that the activities made presented themselves satisfactorily favoring the health and well-being of the participants, however it is important to emphasize that such actions should be adapted to the routine of the units.

KEYWORDS: Primary attention to health. Health education. Occupational therapy.

RESUMO: A educação em saúde é um método promissor ao enfrentamento das adversidades que afetam a saúde da população. Trata-se de um relato de experiência, com abordagem descritiva. Com objetivo de narrar a experiência vivenciada por estudantes de terapia ocupacional numa Unidade Municipal de Saúde – UMS. Apto e capaz de designar inúmeras formas de cuidado de maneira adequada percebeu-se a terapia ocupacional se sobressai por possuir um olhar apoiador e potencializador. Conclui-se que as atividades confeccionadas apresentaram-se satisfatoriamente favorecendo para a saúde e o bem-estar dos participantes, contudo é importante ressaltar que tais ações devem se adaptadas a rotina das unidades.

PALAVRAS-CHAVE: Atenção primária à saúde. Educação em saúde. Terapia ocupacional.

¹ University of Amazônia (UNAMA), Belém – PA – Brazil. Graduation in Occupational Therapy. ORCID: <https://orcid.org/0000-0003-1423-1742>. E-mail: nayannaflexa42@gmail.com

² University of Amazônia (UNAMA), Belém – PA – Brazil. Graduation in Occupational Therapy. ORCID: <https://orcid.org/0000-0003-2624-0734>. E-mail: rabrigido.ic@gmail.com

³ University of Amazônia (UNAMA), Belém – PA – Brazil. Graduation in Occupational Therapy. ORCID: <https://orcid.org/0000-0002-3089-8945>. E-mail: sarapnogueira7@gmail.com

⁴ University of Amazônia (UNAMA), Belém – PA – Brazil. Graduation in Occupational Therapy. ORCID: <https://orcid.org/0000-0002-6363-7741>. E-mail: samanthafnunes@hotmail.com

RESUMEN: *La educación en salud es un método prometedor al enfrentamiento de la adversidad que afectan la salud de la población. Se trata de un informe de experiencia, con enfoque descriptivo. Con el objetivo de narrar la experiencia vivenciada por las estudiantes de terapia ocupacional en una Unidad Municipal de Salud – UMS. Apto y capaz de designar muchas maneras de atención adecuadamente, se dio cuenta de que la terapia ocupacional sobresale por tener una mirada de apoyo y potenciación. Se concluyó que las actividades hechas se han presentado satisfactoriamente favoreciendo la salud y el bienestar de los participantes, es importante comprender sin embargo que tales acciones deben adaptarse a la rutina de las unidades.*

PALABRAS CLAVE: *Atención primaria de salud. Educación en salud. Terapia ocupacional.*

Introduction

Nelson Mandela once declared that "education is the most powerful weapon that can be used to change the world" (our translation). This phrase expresses the important role of education as an instrument of change in society. Therefore, in order to have a positive impact and thus make a difference in people's lives, health must start with education (PITAGUARI, 2016).

Helman (1994) explains that most of the society suffers from some physical or emotional discomfort and enjoy countless self-help or seek help from others. Silva and Seffner (2015) complement by mentioning some precautions, such as: having tea; seeking a doctor, healer or prayer; resort to beliefs or a family member, friend, neighbor; the use of energetic therapies, such as: Reiki, Aromatherapy, Acupuncture, Massage Therapy, among others. Caring for this, only in the immediate effectiveness of relieving the feeling of discomfort of people who seek treatment.

The achievements and tribulations that we face today, in the field of health, are reflections of a historical and political-social circumstance that Brazil faced over time (POLIGNANO, 2005). In Brazil from the 19th century onward, which had the primary proposals for health education (REIS *et al.* 2013).

Also, according to the author, such actions were aimed at hygiene behaviors, since they aimed at the introduction and European customs in the Brazilian elite. As for the rest, the sanitary campaigning measures, which began only at the end of that century, were intended to control some epidemics, such as: yellow fever, which caused damage to trade.

Salci *et al.* (2013) say that health education as multifaceted, due to its numerous proportions, such as: political, philosophical, social, religious, cultural, in addition to including the practical and theoretical aspects of the individual, group, community or society.

The health-disease process is included in two facets, making it necessary for preservation or to prevent or delay the presence of diseases and it is essential to bring quality of life to the person or delay the complications of the process of illness.

In the meantime, a health professional who fits between education and health is the Occupational Therapist, since he surrenders himself as a driving force in health education, as he dedicates himself to the search for understanding health-society relations (ROCHA; SILVA; RAIMUNDO, 2016). Rocha and Souza (2011) complement that, although the emergence in Brazil of the profession in Basic Health Units - UBS has developed since the 90s in unequal cities, such as: São Paulo, Belo Horizonte, Camaragibe and Sobral, it is verified the evidence by Sousa (2015) that such professionals are formed and qualified to be hired. Thus, their introduction may be to health services in general, that is, to Primary Health Care (PHC) devices, such as: the Family Health Units (USF) and the teams in which they constitute the service, such as: the Expanded Nucleus Family Health and Primary Care (NASF-AB), Consults in the Street (CnR) and Family Health teams (eSF), in the services of the Psychosocial Care Network (RAPS), such as: the different types of Psychosocial Care Centers (CAPS), the Emergency Care in Mental Health (PASM), the Child Care Unit (UAI) and the Residential Therapeutic Service (SRT) - or Therapeutic Residence.

Thus, the present study aimed to narrate the experience lived by students of Occupational Therapy at a time of supervised practice at a Municipal Health Unit (UMS, Portuguese initials).

Methodological procedures

This study has a descriptive approach and is characterized as an experience report resulting from observation by students at the time of Supervised Practical Activity (APS) of the Occupational Therapy Course at the University of the Amazon (UNAMA), the subject of which was Occupational Therapy in Geriatrics and Gerontology .

In the period of 30 of October to 4 of December of 2017, once a week, in the morning shift, the educational actions were carried out in a UMS located in the municipality of Ananindeua in the State of Pará-PA, located in the north of Brazil, the target audience of the action were adults and the elderly and your companions.

During the actions, low-cost resources made by the students were used in order to promote greater dynamism to learning and an accessible language, as according to Brazil (2007), the dynamics and games are revealed to be affective-participatory techniques in health

education. Based on the requests observed at the UMS itself, the proposed themes involved: Stress; Diabetes and Hypertension and Men's Health.

Authorized by the health unit, with the premise that they were supervised and that no confidential information was revealed or compromised the identity of the participants and the unit where the meetings were held.

Results and discussion

The introduction into practice at all times leads us to reflect on how and where we are going to use with clarity the learning acquired in the academy. Since this process requires, many times, a momentary survey based on the areas in which we are going to act, in this case Primary Health Care (ABS, Portuguese initials), which involves a clientele ranging from children to the elderly, in their differentiated problems.

The first on-site meeting with the team made us feel free to conduct the actions we were going to use, but it is important to comment that we faced another challenge, which was working as a team and the hectic routine of a unit. The first theme worked was aimed at clarifying doubts and providing information to users of the unit about Occupational Therapy, since the service was implemented in the unit through academic practice, at first it was noted that many users were afraid, but at the same time with an interest in better understanding the work developed by the Occupational Therapist professional.

In the second meeting, there was the second theme focused on Stress in everyday life, through the application of the Stress Perception Scale-10 (Eps-10). Those who participate and obtained medium or high stress scores were instructed to look for a professional, and the impacts caused on daily life were previously explained and alternatives for reduction, such as: the use of integrative and complementary practices, the insertion leisure activities; changing habits, among others.

In the third meeting, the actions focused on hypertensive and diabetic patients at the unit, which are pathologies that cause concern to health professionals. Medina (2019) informs that diabetes is exposed to numerous complications, neuropathy (nerve damage) being one of them, capable of designating symptoms such as numbness or pain, causing changes in motor function and sensitivity.

The third theme called “Diabetes and sensitivity” took place through educational folders in order to prevent neuropathy, control of diabetes and a healthy lifestyle (food, physical activity, avoiding alcoholic beverages, smoking, etc.). A foot made by students using

a plastic bottle was used, which didactically helped in the guidance on attention and care of the feet.

Bringing a warning about the importance of controlling the glycemic rate (blood sugar) with the intention of avoiding them in the future (MEDINA, 2019). The fourth meeting was held with the theme called “Complications of Diabetes”, in the form of dynamics using signs of true and false, also made by the students, to minimize the impact of the subject.

Occupational Therapy stands out for the use of human activity as a work tool. According to Silva and Emmel (1993), all activity is examined and evaluated through a careful analysis, in order to distinguish the cooperation it has for the patient. Through such analysis, motor, sensory, cognitive, emotional and social skills involved with the activity intended to be used with the patient can be detected.

The fifth and last meeting was aimed at the male population of coverage in the unit, with the beginning of November there was an incentive to talk to the public about the importance of taking care of health. Given this, there was the fifth theme named "Man also takes care" through an educational folder promoting information about exams that evaluate the prostate, especially the rectal touch, in order to overcome prejudice.

The UMS team was going to promote a health action in a community center and we were invited to participate and conduct a lecture and activities for the participating users, and so we had the possibility to share work spaces with doctors, nurses, social workers and other professionals, and we managed to contribute a little bringing the vision of Occupational Therapy for them and the users.

The practical experience with adults and the elderly, in addition to being pleasurable, was a great learning experience. There was an opportunity to hold workshops, dynamics and many welcoming conversations, through which the interaction between the participating users was noted in order to resolve doubts and inconveniences. However, it was observed that some had knowledge considered insufficient on the subject and showed dissatisfaction with the public service.

However, their concern in the search for information was notorious, mainly with reference to pathogenic comorbidities, such as: Hypertension and Diabetes. Thus, this experience proved to be an important tool to motivate the community on issues related to health promotion in search of autonomy, valuing self-care and skills development.

As well, it is important to highlight the work in the community, Souza, Colomé, Costa and Oliveira (2005) show in their studies that such work gives health professionals the opportunity to learn about the reality and potential of the environment, in order to encourage

participants to obtain collective strategies to tackle the problems experienced by this community.

Still according to the authors, the individual, when getting involved in a group, has the opportunity to expose his thoughts, to give his opinion, his point of view, or his silence, benefiting through the exchanges of experiences that occur between them and through the contributions of health professionals. Even in the face of unforeseen circumstances and even minor difficulties, it was a positive and aggregating practice, both in professional and personal life. Thus, we are realizing how important the role of an Occupational Therapist is in places that have not yet included one in its team.

Final considerations

It is evident how much the Occupational Therapist contributed to improve the quality of life of users of the basic health system, exercising positive actions in the prevention and promotion of people's health in the Basic Health Units, generating personal and professional improvement in health care, in Education and Social Assistance in the profession.

Most of the studies found were published in Nursing journals, in which they showed commitment to debate the theme, however few studies in other published areas exist, especially in Occupational Therapy, a health professional who fits this configuration of between education and health.

Given all of the above, an important factor to highlight is that education and health are interconnected, thus, it is understood that health professionals practice health education in their daily lives without even perceiving. Therefore, it is possible to emphasize the relevance of the initiative of the health professional to work with health promotion, whether in the area of health, social or even educational.

There are countless challenges that health professionals face daily due to the precarious conditions of the health system in Brazil. However, health education, despite having different methods and segments, is not limited only to disseminate knowledge to the community, it also constitutes bonds between assisted and professionals, in order to promote the active participation of the community, regarding habits that agree on health and quality of life of that population.

It is concluded that, something that must be taken into consideration, such actions must be adapted to the routine of the UMS, in order to be able to function properly and actively, in order to bring good results in the end. As well as the low level of formation of

health professionals, which copiously replicate groups and activities that already exist in the UMS, without rethinking, restructuring or redesigning, so that they can improve their practices in collective actions, especially in health education groups.

REFERENCES

- BRASIL. Ministério da Saúde. Secretaria de Gestão Estratégica e Participativa. Departamento de Apoio à Gestão Participativa. **Caderno de educação popular em saúde**. Brasília, DF: Ministério da Saúde, 2007.
- HELMAN, C. G. **Cultura, saúde e doença**. Trad. Eliane Mussnich. 2. ed. Porto Alegre, RS: Artes Médicas, 1994. 333 p.
- MEDINA, J. L. **Tipos de neuropatia diabética**. 2019. Available: <https://apdp.pt/viver-bem-a-diabetes/tipos-de-neuropatia-diabetica/>. Access: 15 Nov. 2020.
- PITAGUARI, A. **Educação: base de saúde e bem-estar?** 2016. Available: <http://autonomiaemsaude.net.br/>. Access: 15 Nov. 2020.
- POLIGNANO, M. V. **HISTÓRIAS DAS POLÍTICAS DE SAÚDE NO BRASIL**. Uma pequena revisão. 2005. Available: <http://medicinadeemergencia.org/>. Access: 31 Mar. 2021.
- REIS, T. C. *et al.* Educação em saúde: aspectos históricos no Brasil. **J Health Sci Inst.**, v. 31, n. 2, p. 219-223, 2013.
- ROCHA, E. F.; SOUZA, C. C. B. X. Terapia Ocupacional em reabilitação na Atenção Primária à Saúde: possibilidades e desafios. **Revista de Terapia Ocupacional da Universidade de São Paulo**, v. 22, n. 1, p. 36-44, jan./abr. 2011. DOI: <https://doi.org/10.11606/issn.2238-6149.v22i1p36-44>
- ROCHA, P. S; SILVA, S. S; RAIMUNDO, J. B. Educação em saúde no âmbito escolar: ações da terapia ocupacional. **Revista Criar Educação**, 2016. DOI: <http://dx.doi.org/10.18616/ce.v0i0.2918>
- SALCI, M. A. *et al.* Educação em saúde e suas perspectivas teóricas: algumas reflexões. **Texto Contexto Enferm.**, Florianópolis, v. 22, n. 1, p. 224-300, jan./mar. 2013.
- SILVA, A. D.; SEFFNER, F. Educação em saúde: o que se ensina e o que se aprende? Representações de saúde e doença para homens idosos em situação de adoecimento. **Textura**, n. 33, jan./abr. 2015.
- SILVA, C. C. B.; EMMEL, M. L. G. Jogos e brincadeiras: roteiro de análise de atividades para o terapeuta ocupacional. **Cadernos de Terapia Ocupacional da UFSCar**, São Carlos, v. 4, n. 1, p. 46-62, 1993.
- SOUSA, E. N. Q. **Inserção do terapeuta ocupacional em dispositivos da Rede de Saúde no município de João Pessoa**. 2015. 60 f. Monografia (Trabalho de Conclusão do Curso de Terapia Ocupacional) – Universidade Federal da Paraíba, João Pessoa, 2015.

SOUZA, A. C.; COLOMÉ, I. C. S.; COSTA, L. E. D.; OLIVEIRA, D. L. L. C. A Educação em saúde com grupos na comunidade: uma estratégia facilitadora da promoção da saúde. **Rev Gaúcha Enferm.**, Porto Alegre, v. 26, n. 2, p. 147-530, ago. 2005.

How to reference this article

FLEXA N. S.; CAMARGO R. B. I.; NOGUEIRA S. P.; NUNES S. C. F. Occupational Therapy in the context of health education: an experience report. **Temas em Educ. e Saúde**, Araraquara, v. 17, n. 00, p. e021007, 2021. e-ISSN 2526-3471. DOI: <https://doi.org/10.26673/tes.v17i00.14925>

Submitted: 23/03/2021

Required revisions: 26/03/2021

Accepted: 01/04/2021

Published: 20/04/2021